

IN THE UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF DELAWARE

SCIELE PHARMA, INC. and SCIELE
PHARMA CAYMAN LTD.,

Plaintiffs,

v.

MYLAN PHARMACEUTICALS, INC. and
MYLAN LABORATORIES, INC.,

Defendants.

Civil Action No. 07-664

JURY TRIAL DEMANDED

**AFFIDAVIT OF SERVICE OF PROCESS OF
SUSAN M. COLETTI
PURSUANT TO 10 DEL. C. § 3104 AND L.R. 4.1(b)**

STATE OF DELAWARE

)

)

SS.

NEW CASTLE COUNTY

)

Susan M. Coletti, being duly sworn according to law, deposes and says as follows:

1. I am plaintiffs' counsel of record in this action.
2. Pursuant to 10 Del. C. §3104 and Local Rule 4.1(b), this Affidavit is being submitted regarding service of process on the Defendant Mylan Pharmaceuticals, Inc.
3. The Defendant Mylan Pharmaceuticals, Inc. is a non-resident of the State of Delaware and is presently located at 781 Chestnut Ridge Road, Morgantown, WV, 26505, with a registered agent located at Corporation Service Company, 209 West Washington Street, Charleston, WV, 25302.
4. On October 26, 2007, I caused to be mailed to Defendant Mylan Pharmaceuticals, Inc., by registered mail, return receipt, a notice letter, a copy of which is attached hereto as Exhibit A and made a part hereof, together with copies of the Summons and Complaint as served

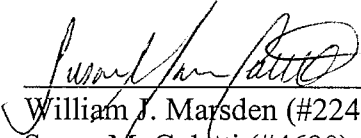
upon the Secretary of State of Delaware. The notice letter and copies of the Summons and Complaint were contained in the same envelope at the time of its mailing on October 26, 2007.

5. Subsequently, I learned that the letter sent via registered mail to the Defendant Mylan Pharmaceuticals, Inc. on October 26, 2007 was delivered on November 2, 2007 and was accepted on behalf of Mylan Pharmaceuticals, Inc. by an individual whose name appears to be Christy Legg. Documentation evidencing delivery is attached hereto as Exhibit B. I received documentation on November 7, 2007 from the United States Postal Service.

I declare under penalty of perjury under the laws of the United States of America that the foregoing is true and correct. Executed at Wilmington, Delaware this 7th day of November, 2007.

FISH & RICHARDSON P.C.

By:


William J. Maysden (#2247)
Susan M. Coletti (#4690)
919 N. Market Street, Suite 1100
PO Box 1114
Wilmington, DE 19899-1114
Telephone: (302) 652-5070

Attorneys for Plaintiff

Exhibit A

FISH & RICHARDSON P.C.

Suite 1100
919 N. Market Street
P.O. Box 1114
Wilmington, Delaware
19899-1114

Telephone
302 652-5070

Facsimile
302 652-0607

Web Site
www.fr.com

Frederick P. Fish
1855-1930

W.K. Richardson
1859-1951

October 26, 2007

VIA REGISTERED MAIL
RETURN RECEIPT REQUESTED (RA 187 584 668 US)

Mylan Pharmaceuticals, Inc.
c/o Corporation Service Company
209 West Washington Street
Charleston, WV 25302



Re: *Sciele Pharma, Inc. et al. v. Mylan Pharmaceuticals, Inc. et al.*
USDC-DE - 07-664

ATLANTA

AUSTIN

BOSTON

DALLAS

DELAWARE

MUNICH

NEW YORK

SAN DIEGO

SILICON VALLEY

TWIN CITIES

WASHINGTON, DC

Dear Sir or Madam:

Enclosed are copies of the Summons, Complaint, and Notice of Availability of Magistrate Judge in the above-captioned matter. This will serve as notice that service of the originals of such process has been made upon the Delaware Secretary of State on October 23, 2007, and that under 10 Del. C. §3104, such service is as effectual to all intents and purposes as if it had been made upon Mylan Pharmaceuticals, Inc., personally within this State.

Very truly yours,

Susan M. Coletti

SMC/dob

Enclosures

80050720.doc

Exhibit B

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

*Mylan Pharmaceuticals, Inc.
c/o Corporation Service Company
209 W. Washington Street
Charleston, WV 25302*

2. Article Number (Copy from service label)

RA 187584668 U.S.

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-0952

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery

Christy Hegg *11/02/07*

C. Signature

X *Christy Hegg* ☒ Agent ☐ Addressee

D. Is delivery address different from item 1? ☐ YesIf YES, enter delivery address below: ☐ No

3. Service Type

- ☐ Certified Mail ☐ Express Mail
☒ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes